Standard Operating Procedure	SOP No.
Vehicle Accident Procedure	1-13

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Vehicle Accident Procedure

1 Purpose and Scope

1.1 This procedure describes the steps to be taken when a Company employee or Company property is involved in a vehicle accident and there is property damaged or result in injuries. The Company must obtain the best information possible as soon as possible in the event of an employee vehicle accident which may result in a claim against the Company. The incident may involve Company employees or property, injury to a private citizen, or damage to private property which may become damaged as a result of operations of Company vehicle and/or equipment.

2 Responsibility:

- 2.1 It is the responsibility of the vehicle operator to immediately notify his/her supervisor when they are involved in a vehicle accident.
- 2.2 It is the responsibility of the vehicle operator to immediately notify the Auto Shop when they are involved in a vehicle accident.
- 2.3 It is the supervisor's responsibility to ensure the Auto Shop has been notified by the vehicle operator.
- 2.4 It is the Auto Shop's responsibility to notify the Safety Department Manager in the event injuries were involved in the vehicle accident.
- 2.5 It is the Auto Shop's responsibility to prepare the Vehicle Accident Report

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3 Procedure:

- 3.1 If injuries are involved, immediately contact emergency medial services and/or law enforcement for assistance
 - 3.1.1 Do not move injured persons unless the danger of fire or traffic makes it necessary
 - 3.1.2 If you are trained, render aid to the injured parties
 - 3.1.3 If you are injured, stay in your vehicle and minimized your movements unless it is dangerous to stay in your vehicle
 - 3.1.4 Beware of traffic if you must exit your vehicle
- 3.2 As soon as it is safe and care has been rendered to the injured, notify your supervisor of the accident
- 3.3 Notify the Auto Shop of the accident
- 3.4 Answer law enforcement questions, but make no comments about assuming responsibility
- 3.5 Complete *Driver's Report of Accident* located in the glove box of the vehicle. Be sure to include:
 - 3.5.1 Name, address, home, cell, office phone and drivers license number of all other drivers involved
 - 3.5.2 Name, address, phone number, policy number of insurance carrier for all other drivers involved
 - 3.5.3 License plate and vehicle description of all vehicles involved
 - 3.5.4 Name and address of vehicle owners if different from drivers
 - 3.5.5 A complete description of damage to other vehicles or property. If camera is available, take photos of damage
 - 3.5.6 Name, address and phone numbers of any persons injured or claiming they were injured
 - 3.5.7 If any persons are transported to a hospital, find out the name of the hospital

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- 3.5.8 Name, badge number and agency of any officer investigating the accident
- 3.5.9 Name, address and phone numbers of witnesses
- 3.5.10 Diagram the precise location of the accident, the road condition and the travel direction of all vehicles involved
- 3.6 If you are unable to safely drive your vehicle, contact the Auto Shop for towing arrangements
- 3.7 As soon as possible, forward the completed *Driver's Report of Accident* to the Auto Shop